

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724393

FILED
Jan 08, 2008
Secretary of State

Entity Name: FLORIDA WEST COAST IRISH-AMERICAN CLUB, INC.

Current Principal Place of Business:

158 BOCA CIEGA PT BLVD S.
ST. PETERSBURG, FL 33708 US

New Principal Place of Business:

2077 PINE RIDGE DR.
CLEARWATER, FL 33763 US

Current Mailing Address:

158 BOCA CIEGA PT BLVD S.
ST. PETERSBURG, FL 33708 US

New Mailing Address:

2077 PINE RIDGE DR.
CLEARWATER, FL 33763 US

FEI Number: 59-2924184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUGHES, YVONNE
158 BOCA CIEGA PT BLVD S.
ST. PETERSBURG, FL 33708 US

Name and Address of New Registered Agent:

REILLY, ROBERT A T
2077 PINE RIDGE DR.
CLEARWATER, FL 33763 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT A. REILLY

01/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COWEN, OLIVE
Address: 2429 ECUADORIAN WAY #27
City-St-Zip: CLEARWATER, FL 33763

Title: VP () Delete
Name: WYNNE, PIERCE
Address: 2531 ROYAL PINE CIRCLE DR.
City-St-Zip: CLEARWATER, FL 33763

Title: DS () Delete
Name: HUNT, NORA
Address: 1685 HONEY BEAR LANE
City-St-Zip: DUNEDIN, FL 34698

Title: T () Delete
Name: HUGHES, YVONNE
Address: 158 BOCA CIEGA PT BLVD S
City-St-Zip: ST PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: COWEN, MICHAEL
Address: 2429 ECUADORIAN WAY #27
City-St-Zip: CLEARWATER, FL 33763

Title: VP (X) Change () Addition
Name: SUGRUE, MIKE
Address: 3558 RIDGE BLVD.
City-St-Zip: PALM HARBOR, FL 34684

Title: DS (X) Change () Addition
Name: MAHONEY, JULIA
Address: 2341 HAITIAN DR. #30
City-St-Zip: CLEARWATER, FL 33763

Title: T (X) Change () Addition
Name: REILLY, ROBERT A T
Address: 2077 PINE RIDGE DR.
City-St-Zip: CLEARWATER, FL 33763

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A REILLY

T

01/08/2008

Electronic Signature of Signing Officer or Director

Date